Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>8/6/2007</u>	Address:	6253 Poplar Grove Rd
Case #:	33F28006		Nashville, IN
County:	Brown		
Type of Laboratory Seizure (check one)		Seizure I.ocation (check all that apply)	
Chemi	tional Lab ical/Glassware/Equipment (only) site (only)	⊠ Residence ⊠ Outbuilding □ Vehicle	☐ Hotel/Motel ☐ Open No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) ☑ Lithium/Ammonia Reaction(s): Barn			
Red Phosphorous/Iodine Reaction(s):			
∑ Flammable Solvents: Barn			
Water Reactive Metal (Lithium): Barn, House			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s): <u>Barn</u>			
Corrosive Acid: Barn			
Corrosive Base:			
Other	(item and location):		
Child under age 18 discovered (check one) Yes 0 (number present) No *If yes, fax report to Child Protective Services		 Investigative Information Ephedrinc/Pseudocphedrine Tracking Log Retail/Merchant Tip Other:SD 	
This rep	ort is to be faxed to the following ago	encies <u>that serve the l</u>	ocation:
Fire Department: <u>Twp FD</u> Health Department: <u>Brown Co</u>		Fax: <u>Hand delivered</u> Fax: <u>(812) 988-5601</u> Fax:	
Child Pro	otection Service:		
Investiga	<u> </u>	юпе <u>(812) 332-4411</u>	
** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.			

*** This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.